

FILED

JUL 02 2019

CLERK, U.S. BANKRUPTCY COURT
NORTHERN DISTRICT OF TEXAS☐ Check if this is an
amended filing

Fill in this information to identify the case:

United States Bankruptcy Court for the:

District of

(State)

Case number

Chapter

11

Official Form 201

Voluntary Petition for Non-Individuals Filing for Bankruptcy

04/19

If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and the case number (if known). For more information, a separate document, *Instructions for Bankruptcy Forms for Non-Individuals*, is available.

1. Debtor's name

Foreclosure Consulting Service, Inc2. All other names debtor used
in the last 8 years

Includes any assumed names,
trade names, and doing business
as names

3. Debtor's Federal Employer
Identification Number (EIN)04-3724747

4. Debtors address

Principal place of business

Mailing address, if different from principal place
of business1212 E. Arapaho DR.

Number Street

Ste 216Richardson TX 75081

City State ZIP Code

2004 Biscayne DR.

Number Street

P.O. Box

Lewisville TX 75067

City State ZIP Code

Location of principal assets, if different from
principal place of business

Number Street

City State ZIP Code

5. Debtor's website (URL)

www foreclosure service.com

6. Type of debtor

- ☒ Corporation (including Limited Liability Company (LLC) and Limited Liability Partnership (LLP))
☐ Partnership (excluding LLP)
☐ Other. Specify: _____

Debtor:

Foreclosure Consulting LLC

Case number (if known) _____

7. Describe debtor's business

A. Check one:

- ☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))
☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
☐ Railroad (as defined in 11 U.S.C. § 101(44))
☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))
☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))
☐ Clearing Bank (as defined in 11 U.S.C. § 781(3))
☒ None of the above

B. Check all that apply:

- ☐ Tax-exempt entity (as described in 26 U.S.C. § 501)
☐ Investment company, including hedge fund or pooled investment vehicle (as defined in 15 U.S.C. § 80a-3)
☐ Investment advisor (as defined in 15 U.S.C. § 80b-2(a)(11))

C. NAICS (North American Industry Classification System) 4-digit code that best describes debtor. See <http://www.uscourts.gov/four-digit-national-association-naics-codes>.

8. Under which chapter of the Bankruptcy Code is the debtor filing?

Check one:

- ☐ Chapter 7
☐ Chapter 9
☒ Chapter 11. Check all that apply:

- ☒ Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,725,625 (amount subject to adjustment on 4/01/22 and every 3 years after that).
☐ The debtor is a small business debtor as defined in 11 U.S.C. § 101(51D). If the debtor is a small business debtor, attach the most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if all of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).
☐ A plan is being filed with this petition.
☐ Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).
☐ The debtor is required to file periodic reports (for example, 10K and 10Q) with the Securities and Exchange Commission according to § 13 or 15(d) of the Securities Exchange Act of 1934. File the *Attachment to Voluntary Petition for Non-Individuals Filing for Bankruptcy under Chapter 11* (Official Form 201A) with this form.
☐ The debtor is a shell company as defined in the Securities Exchange Act of 1934 Rule 12b-2.

☐ Chapter 12

9. Were prior bankruptcy cases filed by or against the debtor within the last 8 years?

If more than 2 cases, attach a separate list.

☒ No☐ Yes.

District _____

When _____

Case number _____

MM / DD / YYYY

District _____

When _____

Case number _____

MM / DD / YYYY

10. Are any judgments or orders pending or to be filed by a business creditor or an affiliate of the debtor?

List all orders if more than 3, attach a separate list.

☒ No☐ Yes.

Debtor _____

Relationship _____

District _____

When _____

MM / DD / YYYY

Case number, if known _____

Debtor

Foreclosure Consulting Serv

Case number (if known) _____

11. Why is this case filed in this district?

Check all that apply:

- ☒ Debtor has had its domicile, principal place of business, or principal assets in this district for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other district.
- ☐ A bankruptcy case concerning debtor's affiliate, general partner, or partnership is pending in this district.

12. Does the debtor own or have possession of any real property or personal property that needs immediate attention?

- ☒ No
- ☐ Yes. Answer below for each property that needs immediate attention. Attach additional sheets if needed.

Why does the property need immediate attention? (Check all that apply.)

- ☐ It poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety. What is the hazard? _____
- ☐ It needs to be physically secured or protected from the weather.
- ☐ It includes perishable goods or assets that could quickly deteriorate or lose value without attention (for example, livestock, seasonal goods, meat, dairy, produce, or securities-related assets or other options).
- ☐ Other _____

Where is the property?

Number _____ Street _____

City _____ State _____ ZIP Code _____

Is the property insured?

- ☐ No
- ☐ Yes. Insurance agency _____
- Contact name _____
- Phone _____

Financial and administrative information

13. Debtor's estimate of available funds

Check one:

- ☐ Funds will be available for distribution to unsecured creditors.
- ☒ After any administrative expenses are paid, no funds will be available for distribution to unsecured creditors.

14. Estimated number of creditors

- | | | |
|--|--|--|
| <input checked="" type="checkbox"/> 1-49 | <input type="checkbox"/> 1,000-5,000 | <input type="checkbox"/> 25,001-50,000 |
| <input type="checkbox"/> 50-99 | <input type="checkbox"/> 5,001-10,000 | <input type="checkbox"/> 50,001-100,000 |
| <input type="checkbox"/> 100-199 | <input type="checkbox"/> 10,001-25,000 | <input type="checkbox"/> More than 100,000 |
| <input type="checkbox"/> 200-999 | | |

15. Estimated assets

- | | | |
|--|--|--|
| <input checked="" type="checkbox"/> \$0-\$50,000 | <input type="checkbox"/> \$1,000,001-\$10 million | <input type="checkbox"/> \$500,000,001-\$1 billion |
| <input type="checkbox"/> \$50,001-\$100,000 | <input type="checkbox"/> \$10,000,001-\$50 million | <input type="checkbox"/> \$1,000,000,001-\$10 billion |
| <input type="checkbox"/> \$100,001-\$500,000 | <input type="checkbox"/> \$50,000,001-\$100 million | <input type="checkbox"/> \$10,000,000,001-\$50 billion |
| <input type="checkbox"/> \$500,001-\$1 million | <input type="checkbox"/> \$100,000,001-\$500 million | <input type="checkbox"/> More than \$50 billion |

Debtor

Foreclosure Consulting Svc's

Case number (if known) _____

16. Estimated liabilities

- ☐ \$0-\$50,000
☐ \$50,001-\$100,000
☒ \$100,001-\$500,000
☐ \$500,001-\$1 million

- ☐ \$1,000,001-\$10 million
☐ \$10,000,001-\$50 million
☐ \$50,000,001-\$100 million
☐ \$100,000,001-\$500 million

- ☐ \$500,000,001-\$1 billion
☐ \$1,000,000,001-\$10 billion
☐ \$10,000,000,001-\$50 billion
☐ More than \$50 billion

Relief, Declaration, and Signatures

WARNING - Making a false statement is a serious crime. Making a false statement in connection with a bankruptcy case can result in fines up to \$250,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

17. Declaration by authorized representative of debtor

- ☒ The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.
- ☒ I have been authorized to file this petition on behalf of the debtor.
- ☒ I have examined the information in this petition and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on 07-01-2019
MM / DD / YYYY

Tra'Monica Green
Signature of authorized representative of debtor
Title President

Tra'Monica Green
Printed name

18. Signature of attorney

X

Signature of attorney for debtor

Date

MM / DD / YYYY

Printed name

Firm name

Number Street

City

State

ZIP Code

Contact phone

Email address

Bar number

State

Debtor 1

First Name _____ Middle Name _____ Last Name _____

Case number (if known) _____

Unsecured claim**18**

What is the nature of the claim? _____ \$ _____

Creditor's Name _____

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed
☐ None of the above apply

Number _____ Street _____

Does the creditor have a lien on your property?

- ☐ No
☐ Yes. Total claim (secured and unsecured): \$ _____
Value of security: - \$ _____
Unsecured claim \$ _____

City _____ State _____ ZIP Code _____

Contact _____

Contact phone _____

19

What is the nature of the claim? _____ \$ _____

Creditor's Name _____

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed
☐ None of the above apply

Number _____ Street _____

Does the creditor have a lien on your property?

- ☐ No
☐ Yes. Total claim (secured and unsecured): \$ _____
Value of security: - \$ _____
Unsecured claim \$ _____

City _____ State _____ ZIP Code _____

Contact _____

Contact phone _____

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What is the nature of the claim? _____ \$ _____

Creditor's Name _____

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed
☐ None of the above apply

Number _____ Street _____

Does the creditor have a lien on your property?

- ☐ No
☐ Yes. Total claim (secured and unsecured): \$ _____
Value of security: - \$ _____
Unsecured claim \$ _____

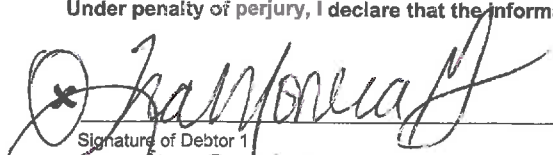
City _____ State _____ ZIP Code _____

Contact _____

Contact phone _____

Part 2: Sign Below

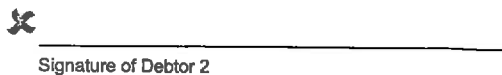
Under penalty of perjury, I declare that the information provided in this form is true and correct.



Signature of Debtor 1

Date 7-2-19

MM / DD / YYYY



Signature of Debtor 2

Date _____

MM / DD / YYYY

UNITED STATES BANKRUPTCY COURT
NORTHERN DISTRICT OF TEXAS

In Re:

Foreclosure
Consulting
Service, INC

Debtor(s)

§
§
§
§
§
§
§

Case No.:

VERIFICATION OF MAILING LIST

The Debtor(s) certifies that the attached mailing list (*only one option may be selected per form*):

- ☒ is the first mail matrix in this case.
- ☐ adds entities not listed on previously filed mailing list(s).
- ☐ changes or corrects name(s) and address(es) on previously filed mailing list(s).
- ☐ deletes name(s) and address(es) on previously filed mailing list(s).

In accordance with N.D. TX L.B.R. 1007.1, the above named Debtor(s) hereby verifies that the attached list of creditors is true and correct.

07-01-2019

Date

x *[Signature]*

Signature of Debtor

Signature of Attorney (if applicable)

3318/04-3724747

Debtor's Social Security (*last four digits only*) / Tax ID No.

Signature of Joint Debtor (if applicable)

Joint Debtor's Social Security (*last four digits only*) / Tax ID No.

Matrix Creditors

1. Wildcat Lending Fund One, LP

4800 Dexter dr.

Dallas, TX 75093

Contact: Teresa Barcelo

Phone: 972-525-4777

2. Seasons Holdings, LLC

5028 Timber Creek

Dallas, TX 75248

Contact: John Davenport

Phone: 469-293-0450